PTO/SB/21 (12-97)
/00. OMB 0651-0031
ENT OF COMMERCE

Please type a plus sign (+) inside this box —>	Approved for use through 9/30/
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Under the Paperwork Reduction Act valid OMB control number.	of 1995, no persor	ns are required to respond	to a colle	ection of information unless it displays a	
		Application Numb	er		
TRANSMITT	AL	Filing Date			
FORM		First Named Inven	itor		
(to be used for all correspondence after	r initial filing)	Group Art Unit			
		Examiner Name			
Total Number of Pages in This Submit	ssion	Attorney Docket Nu	ımber		
	ENCLOS	SURES (check all the	at apply	y)	
Fee Transmittal Form	Assignm (for an A	nent Papers Application)		After Allowance Communication to Group	
Fee Attached	Drawing	.,		Appeal Communication to Board of Appeals and Interferences	
Amendment / Response	Licensin	g-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
After Final	Petition and Acc	Routing Slip (PTO/SB/companying Petition	69)	Proprietary Information	
Affidavits/declaration(s)	To Conv	/ert a nal Application		Status Letter	
Extension of Time Request	Power of	of Attorney, Revocation of Correspondence		Additional Enclosure(s) (please identify below):	
Express Abandonment Request	$\overline{}$	l Disclaimer			
Information Disclosure Statement	H	ntity Statement			
Certified Copy of Priority Document(s)	Remarks	t for Refund			
Response to Missing Parts/ Incomplete Application		1			
Response to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm or Individual name					
Signature					
Date					
CERTIFICATE OF MAILING					
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:					
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